

Doc Code:

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL for FY 2005		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/045,267
		Filing Date	October 23, 2001
		First Named Inventor	P. Agrawal et al
		Examiner Name	TANG, Karen C.
		Art Unit	2151
TOTAL AMOUNT OF PAYMENT (\$) \$130.00		Attorney Docket No.	APP 1291

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Deposit Account Number: 021822 Deposit Account Name: Telcordia Technologies, Inc.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☐ Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims Extra Claims Fee (\$)
 _____ - 20 or HP = _____ x \$50.00 = \$0.00

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims Extra Claims Fee (\$)
 _____ - 3 or HP = _____ x \$200.00 = \$0.00

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listing under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)
 _____ - 100 = _____ / 50 _____ (round up to a whole) x \$250.00 = \$0.00

4. OTHER FEE(S)

Non-English specification, \$130 fee (no small entity discount)

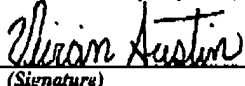
Other (e.g. late filing surcharge): Statutory Disclaimer 1.20(d)


\$130.00

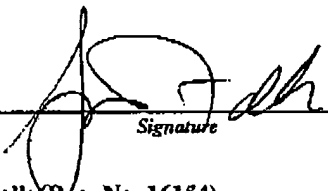
SUBMITTED BY			
Signature	Registration No. (Attorney/Agent)	Telephone	
	16154	(732) 699-4465	
Name (Print/Type)	Date		
James W. Falk	April 20, 2005		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No.
Applicant(s): P. Agrawal et al			APP 1291
Application No. 10/045,267	Filing Date October 23, 2001	Examiner TANG, Karen C.	Group Art Unit 2151
Invention: Method for Dynamically Allocating IP Addresses for Time Sensitive Hosts Based on Priorities and Guard Bands			
<div style="text-align: right;">RECEIVED CENTRAL FAX CENTER APR 20 2005</div> <p>I hereby certify that this <u>Terminal Disclaimer to Obviate a Double Patenting Rejection Over a Prior Patent</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>(703) 872-9306</u>) on <u>April 20, 2005</u> (Date)</p> <div style="text-align: right;"><p>Vivian Austin (Typed or Printed Name of Person Signing Certificate)</p><p> (Signature)</p></div> <p>Note: Each paper must have its own certificate of mailing.</p>			

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RECEIVED CENTRAL FAX CENTER APR 20 2005			
I hereby certify that this <u>Reply to Office Action of February 23, 2005 (11 pages)</u> <small>(Identify type of correspondence)</small>			
is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>(703) 872-9306</u>)			
on <u>April 20, 2005</u> <small>(Date)</small>			
 Vivian Austin <small>(Typed or Printed Name of Person Signing Certificate)</small>  <small>(Signature)</small>			
 Note: Each paper must have its own certificate of mailing.			

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. APP 1291	
Applicant(s): P. Agrawal et al						
Application No. 10/045,267	Filing Date October 23, 2001	Examiner TANG, Karen C.	Customer No. 09941	Group Art Unit 2151	Confirmation No. 2269	
Invention: Method for Dynamically Allocating IP Addresses for Time Sensitive Hosts Based on Priorities and Guard Bands						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	19 -	20 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	6 -	3 =	2	x \$200.00	\$400.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$400.00	
<div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. 021822 in the amount of \$400.00 <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <div style="margin-left: 20px;"><input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div><input type="checkbox"/> Payment by credit card. Form PTO-2038.</div><div>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</div></div>						
 _____ Signature			Dated: April 20, 2005			
James W. Falk (Reg. No. 16154) Telcordia Technologies, Inc. One Telcordia Drive 5G116 Piscataway, NJ 08854-4157 Telephone (732) 699-4465			<div>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date)</div> <div style="border-top: 1px solid black; height: 20px; margin-top: 10px;"></div> <div style="text-align: center; font-size: small;">Signature of Person Mailing Correspondence</div> <div style="border-top: 1px solid black; height: 20px; margin-top: 10px;"></div> <div style="text-align: center; font-size: small;">Typed or Printed Name of Person Mailing Correspondence</div>			
cc:						